

**Department of Public Health and Social Services
Division of Environmental Health
Food Establishment Inspection Report**

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INSPECTION	RSN	TYPE	GRADE	INSPECTION DATE	ESTABLISHMENT NAME
Regular		<input checked="" type="checkbox"/>	<u>1</u>	<u>3/27/2018</u>	<u>WENDY'S</u>
Follow-up				TIME IN	TIME OUT
Complaint	<input checked="" type="checkbox"/>		RATING	<u>12:10 pm</u>	<u>2:50 pm</u>
Investigation			<u>A</u>	SANITARY PERMIT NO.	LOCATION (Address)
Other:				<u>170001688</u>	<u>50 ROUTE 4 STE 320</u> <u>LOT 82-1-5 RD #302 AGANA SHOPPING CENTER</u>
ESTABLISHMENT TYPE				AREA	TELEPHONE
<u>RESTAURANT</u>				<u>8</u>	<u>475-8800</u>
				No. of Risk Factor/Intervention Violations	RISK CATEGORY
				<u>8</u>	<u>3</u>
				No. of Repeat Risk Factor/Intervention Violations	

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Circle designated compliance (IN, OUT, N/O, N/A) for each numbered item. Mark "X" in appropriate box for COS and/or R.

IN = In compliance OUT = Not in compliance N/O = Not observed N/A = Not applicable COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status				COS	R	PTS
Supervision						
1	<input checked="" type="checkbox"/> IN	OUT	Person in charge present, demonstrates knowledge, and performs duties			6
Employee Health						
2	<input checked="" type="checkbox"/> IN	OUT	Management awareness; policy present			6
3	<input checked="" type="checkbox"/> IN	OUT	Proper use of reporting, restriction & exclusion			6
Good Hygienic Practices						
4	<input checked="" type="checkbox"/> IN	OUT	N/A	N/O		6
5	<input checked="" type="checkbox"/> IN	OUT	N/A	N/O		6
Preventing Contamination by Hands						
6	<input checked="" type="checkbox"/> IN	OUT	N/A	N/O		6
7	<input checked="" type="checkbox"/> IN	OUT	N/A	N/O		6
8	<input checked="" type="checkbox"/> IN	OUT				6
Approved Source						
9	<input checked="" type="checkbox"/> IN	OUT				6
10	<input checked="" type="checkbox"/> IN	OUT	N/A	N/O		6
11	<input checked="" type="checkbox"/> IN	OUT				6
12	<input checked="" type="checkbox"/> IN	OUT	N/A	N/O		6
Protection from Contamination						
13	<input checked="" type="checkbox"/> IN	OUT	N/A			6
14	<input checked="" type="checkbox"/> IN	OUT	N/A			6
15	<input checked="" type="checkbox"/> IN	OUT				6
Potentially Hazardous Food (TCS Food)						
16	<input checked="" type="checkbox"/> IN	OUT	N/A	N/O		6
17	<input checked="" type="checkbox"/> IN	OUT	N/A	N/O		6
18	<input checked="" type="checkbox"/> IN	OUT	N/A	N/O		6
19	<input checked="" type="checkbox"/> IN	OUT	N/A	N/O		6
20	<input checked="" type="checkbox"/> IN	OUT	N/A			6
21	<input checked="" type="checkbox"/> IN	OUT	N/A	N/O		6
Consumer Advisory						
22	<input checked="" type="checkbox"/> IN	OUT	N/A			6
Highly Susceptible Populations						
23	<input checked="" type="checkbox"/> IN	OUT	N/A			6
Chemical						
24	<input checked="" type="checkbox"/> IN	OUT	N/A			6
25	<input checked="" type="checkbox"/> IN	OUT				6
Conformance with Approved Procedures						
26	<input checked="" type="checkbox"/> IN	OUT	N/A			6

Risk factors are improper practices or procedures identified as the most prevalent contributing factors of foodborne illness or injury. Public Health interventions are control measures to prevent foodborne illness or injury.

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

Mark "X" in box; if numbered item is not in compliance and/or if COS and/or R. COS = Corrected on-site during inspection R = Repeat violation PTS = Demerit points

Compliance Status				COS	R	PTS
Safe Food and Water						
27			Pasteurized eggs used where required			1
28			Water and ice from approved source			2
29			Variance obtained for specialized processing methods			1
Food Temperature Control						
30			Proper cooling methods used; adequate equipment for temperature control			1
31			Plant food properly cooked for hot holding			1
32			Approved thawing methods used			1
33			Thermometer provided and accurate			1
Food Identification						
34			Food properly labeled; original container			1
Prevention of Food Contamination						
35			Insects, rodents, and animals not present			2
36			Contamination prevented during food preparation, storage & display			1
37			Personal cleanliness			1
38			Wiping cloths: properly used and stored			1
39			Washing fruits and vegetables			1
Proper Use of Utensils						
40			In-use utensils: properly stored			1
41			Utensils, equipment and linens properly stored, dried, handled			1
42			Single-use/single-service articles: properly stored, used			1
43			Gloves used properly			1
Utensils, Equipment and Vending						
44			Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used			1
45			Warewashing facilities: installed, maintained, used; test strips			1
46			Nonfood-contact surfaces clean			1
Physical Facilities						
47			Hot & cold water available, adequate pressure			2
48			Plumbing installed; proper backflow devices			2
49			Sewage and wastewater properly disposed			2
50			Toilet facilities: properly constructed, supplied, & cleaned			2
51			Garbage/refuse properly disposed; facilities maintained			2
52	<input checked="" type="checkbox"/>		Physical facilities installed, maintained, and clean			1
53			Adequate ventilation and lighting; designated areas use			1
Documents and Placards						
54	<input checked="" type="checkbox"/>		Sanitary Permit, Health Certificates valid and posted			2

I have read and understand the above violation(s), and I am aware of the corrective measures that shall be taken.

Person in Charge (Print and Sign)

DEH Inspector (Print and Sign)

Date:

Follow-up (Circle one):

YES NO

Follow-up Date

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ESTABLISHMENT NAME WENDY'S		LOCATION (Address) 50 ROUTE 45E 320 LOT 82-1-5 RIO #302 AGANA SHOPPING CENTER
INSPECTION DATE 3 / 27 / 2018	SANITARY PERMIT NO. 170001688	PERMIT HOLDER QUICK SERVICE FOODS INC.

TEMPERATURE OBSERVATIONS

Item/Location	Temperature (° F)	Item/Location	Temperature (° F)
CUT TOMATOES / PREP LINE	59°	CHICKEN MILLET / OUT OF FRYER	210°
CUT ICEBERG LETTUCE / PREP LINE	44°	CHILI / REHEATING ON COOKTOP	173.5°
CUT RED LEAF LETTUCE / PREP LINE	40°	CHEEDED EGGS / WALKIN	34° F
AMERICAN CHEESE SLICE / PREP LINE	51.5°		
CRISPY CHICKEN PATTY / WARMER	184.5°		
CHICKEN BREAST / WARMER	159°		
FISH FILLET / WARMER (ABOVE)	167.5°		
CHICKEN TENDER / WARMER / PREP	180.5°		
BACON / WARMER	162.0		

ITEM NO.	OBSERVATIONS AND CORRECTIVE ACTIONS	CORRECT BY DATE
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Violations cited in this report must be corrected within the time frames indicated, or as stated in Sections 8-405.11 and 8-406.11 of the Guam Food Code.

A REGULAR INSPECTION WAS CONDUCTED ON THIS DAY BASED ON COMPLAINT #18-029A REGARDING THE SMELL OF FECES, DRINKS TASTING SOUR AND COCKROACHES IN THE DINING AREA.

PREVIOUS INSPECTION DATED 8/24/2017 1/A

COMPLAINT WAS NOT OBSERVED AT TIME OF INSPECTION

NOTE: ~~NOT~~ OBSERVED AN ODOR IN THE KITCHEN ENTRANCE AREA.

THE FOLLOWING VIOLATIONS WERE OBSERVED:

#20 PHF/TCS SUCH AS CUT TOMATOES, ICEBERG LETTUCE, RED LEAF LETTUCE AND AMERICAN CHEESE BEING COLD HELD ABOVE 41°F. ALL PHF/TCS FOOD SHALL BE STORED AT 41°F AND ~~BELOW~~ ^{BELOW} 41°F FOR COLD HOLDING TO PREVENT THE RAPID GROWTH OF BACTERIA.

4/6/2018
COS
THROWN
OUT

#52 FLOORS IN DISREPAIR IN WAREWASHING AREA. FLOOR DRAINS HAVE AN ACCUMULATION OF STAINS / FOOD PARTICLES ~~WAS~~ ^{ARE} ON THE INTERIOR. ALL FLOORS SHALL BE CLEANED AS OFTEN AS NEEDED TO PREVENT THE ATTRACTION OF PESTS. ALL FLOORS SHALL BE REPAIRED TO ALLOW THOROUGH CLEANING.

4/7/18

Based on the inspection today, the items listed above identify violations which shall be corrected by the date specified by the Department. Failure to comply may result in the immediate suspension of the Sanitary Permit or downgrade. If seeking to appeal the result of any notice or inspection findings, a written request for hearing must be submitted to the Director within the period of time established in the notice for corrections.

Person in Charge (Print and Sign)

DEH Inspector (Print and Sign)

DEH-11

TAMARA S. H. 24

EPHO

Date: 3/27/18

Date: 3/27/2018

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